

ALABAMA'S

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Geneva pilot tests medical device to help congestive heart failure patients

Alabama ranks highest in the nation for death from congestive heart failure, according to the Centers for Disease Control and Prevention. The CDC's Center for Health Statistics used population estimates from the U.S. Bureau of Census to calculate the age-adjusted death rates from CHF between 1980 and 1990, and Alabama had the highest incidence rate in both the under and over age 65 categories.

To help manage this, the Geneva County Health Department Home Health staff are pilot testing a home-based monitoring device to collect physiological data for use in evaluating patient progress for congestive heart failure patients. The University of South Alabama College of Medicine's Office of Emerging Health Technologies is managing this six-month study.

The study evaluates the effectiveness of monitoring daily weight and blood pressure readings for congestive heart failure patients and, soon, will include blood glucose levels for diabetics. The program uses Cybernet Medical's MedStar transmission device to capture and forward physiological data to the data record management system in real-time. This enables health care providers to take corrective action for CHF patients or hypertensive patients experiencing changes in blood pressure or weight readings.

"Since weight and blood pressure levels directly impact the risk of CHF and its progression, treatment protocols usually include a medication such as a diuretic or ACE inhibitor combined with diet and exercise programs," explained Carl W. Taylor, the interim director of the U.S.A.'s Office of Emerging Health Technologies.

"A patient's strict adherence to the prescribed regimen is an important part of the treatment's success, especially since it depends greatly on lifestyle modifications. The best method for evaluating patient progress is through a daily monitoring program; however, in rural areas the distance between patients and physicians has posed a significant problem in the past. Cybernet Medical's MedStar device is eliminating this barrier."

Area X Home Care director Cindy Lawford, RN, who is directing the pilot study for the health department, said, "Our goal is to prevent acute episodes of CHF for these patients through daily monitoring and reporting of variances from the parameters set by their physician that require medical attention."

"As part of our overall plan, we needed a simple, easy-to-understand program that would give our patients daily contact with a health care provider. We also wanted the



Nurses Laura Seay (seated) and Ann Dillard demonstrate the device.

Geneva.....continued on page 2

Geneva.....continued from page 1

program to give them a sense of empowerment in taking charge of their diseases. Through this pilot, we hope to show that we've found a way we can improve the patients' quality of life and overall patient outcomes."

At any given time, as many as 20 patients diagnosed with congestive heart failure will be participating in the pilot study, with the majority having been hospitalized at least once in the past 12 months. Geneva County Home Health staff initially visit the patient's home, educate the patient and the family regarding the equipment, and set up the system by connecting it directly to their telephone. Ms. Lawford said this is a simple process, similar to attaching cable or a VCR to a television set.

Each patient is using the hand-held MedStar data transmission device to capture physiological data from connected measurement tools, such as blood pressure cuffs, glucometers or digital scales, usually daily. The patient places the blood pressure cuff on his or her arm, secures it, pushes a button and awaits the data. The vital signs are recorded in the system automatically and once the patient steps on the scales and weighs, the data is automatically transmitted. The data is transferred via standard telephone lines to a collection server, where Laura Seay, RN, Geneva County Home Health Supervisor, views the Web site to assess the data and determine if medical intervention is necessary. Any variances of weight or blood pressure are immediately noted and addressed, resulting in better and more immediate care.

Ms. Seay receives "alerts" through a cascading alert feature of the system if the data is outside the predetermined parameters set by the patient's physician. Alerts are also sent if the patient fails to perform this task at the prescribed time. In this case, Ms. Seay and her staff would phone the patient to remind them to do so.

Ms. Lawford said. "It's a very easy system for the patient to understand and simple to perform, as well as fully automated. Patients and their families gain confidence knowing that health care staff are monitoring them on a daily basis. We hope to soon expand our coverage area in order to assist more patients with their chronic disease control."

The Geneva study is being funded by a grant from the state's Office for the Advancement of Telehealth, Health Resource and Services Administration, and is part of the University of South Alabama's ongoing biomonitoring program.

For more information you may contact Ms. Lawford at 334-347-9574, e-mail Clawford@adph.state.al.us. or Ms. Seay at 334-684-2259, e-mail Lauraseay@adph.state.al.us.

Alabama Department of Public Health

Mission

To serve the people of Alabama by assuring conditions in which they can be healthy.

Value Statement

The purpose of the Alabama Department of Public Health is to provide caring, high quality and professional services for the improvement and protection of the public's health through disease prevention and the assurance of public health services to resident and transient populations of the state regardless of social circumstances or the ability to pay.

The Department of Public Health works closely with the community to preserve and protect the public's health and to provide caring quality services.

ALABAMA'S HEALTH

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Donald E. Williamson, M.D. State Health Officer
Jim McVay, Dr. P.A. Director, Bureau of Health Promotion and Chronic Disease
Arrol Sheehan, M.A. Editor
Takenya Stokes, J.D. Contributing Editor
Toni Prater Graphic Designer
Marion Wilford Photographer

Informational materials in alternative formats will be made available upon request..

Alabama Smoke Alarm Initiative visits Cornerstone

The Alabama Smoke Alarm Initiative kicked off of its program once again in the community of Cornerstone, located in Union Springs, on Saturday, Feb. 22. The kickoff was held at the local community center and featured a disc jockey, food and information about the upcoming program.

The Thompson Cornerstone Volunteer Fire Department, in existence for 15 years, will install free fire alarms in the surrounding communities in homes, churches and small businesses. Local ASAI coordinator Samuel Pritchett, who has been a member of the volunteer fire department for 10 years, is excited about starting the project. "There is a real need for this program here. Lots of people have been lost and injured in fires in the area recently."

The Alabama Smoke Alarm Initiative was created in October 1999 to increase fire education and to decrease fire incidences in Alabama, which is ranked among the top 10 states nationwide for fire-related deaths and injuries. The initiative is funded by the Centers for Disease Control and Prevention and administered by the Alabama Department of Public Health, in conjunction with the Center for Community Health Resource Development at the University of Alabama at Birmingham and the State Fire Marshal's Office.

The initiative provides the resources for local fire departments to install alarms, check existing alarms and provide fire safety education in their communities. A working smoke alarm is an early warning for families and can reduce fire fatalities by 50 percent.

"To date this program has installed 4,798 smoke alarms saving 129 lives in 18 communities located in Bibb, Perry, Sumter and Wilcox counties. And we are happy to now be here in Cornerstone," said Amanda Calhoun, project manager for ASAI with the Injury Prevention Division of the Bureau of Health Promotion and Chronic Disease.

The Thompson Cornerstone Volunteer Fire Department serves a five mile radius which includes the communities of Bruceville, Cornerstone, Goat Hill, Greenwood, Hector, High Log, High Ridge, Hooks Crossroads, Little Sardis, Lowfield, Sedgefield, Simsville and Thompson.

The goal of the Thompson Cornerstone Volunteer Fire Department is to save lives through this program. "It's hard to go out and respond to fires and see people hurt. It's an awful thing to watch," said Thompson Cornerstone Fire Chief Alonza Ellis. "I have a niece who was burned, so fire safety has always been close to my heart."



Local ASAI coordinator Samuel Pritchett and fire chief Alonza Ellis receive recognition from project manager Amanda Calhoun.

Local resident Annie Ruth Jenkins, who will help with the installation visits, is eager to get started. "I hope that this program helps people be more careful when it comes to fires. I can't wait to see how people respond to having the fire alarms installed in their homes."

The volunteer fire department enjoys great support in the Cornerstone community. "Whenever residents see the fire truck responding to a fire they just get in the cars and follow us like a parade. They just want to help out any way they can," said Assistant Fire Chief William Jenkins. Having volunteered for the fire department for eight years, Jenkins said that the greatest need for the funds the volunteer fire department will receive from ASAI is to upgrade the fire truck.

The Rev. Arthur Lee Jones is one of the many supporters of the volunteer fire department and feels the Alabama Smoke Alarm Initiative and the goal of the Thompson Cornerstone Volunteer Fire Department is a blessing. "If one life is lost to a fire it's too much," said Rev. Jones.

By Takenya Stokes



Unwed mothers have worse birth outcomes than married mothers

Unwed pregnancies often result in poor social and economic outcomes, poor educational achievement, and increased poverty for both mother and child. Births to unmarried mothers have tripled in Alabama since 1960. In 2000, the number and percent of births to unmarried women was 21,663 births, or 34.3 percent of all births respectively. Among unmarried women ages 15-44 who became pregnant 60.0 percent had live births, 25.5 percent had abortions, and 14.5 had miscarriages.

The Alabama Department of Public Health, Center for Health Statistics, and the Bureau of Family Health Services, in collaboration with the Alabama Department of Human Resources are pleased to provide a report on "Births to Unwed Mothers in Alabama" that was developed by the Alabama Department of Public Health's Center for Health Statistics. This detailed statistical analysis of unwed births in the state should reinforce what most already know and serve as a great tool to involve those who may be unaware of the depths of this problem in Alabama. It is an excellent resource for legislators, educators, counselors, medical personnel, and anyone who is concerned about unwed and teen pregnancy.

Other key findings are as follows:

- Black and other race mothers having babies in 2000 were about three times as likely to be unmarried as white mothers.
- Teenagers are the most likely to bear a baby out-of-wedlock.
- Unmarried mothers are 65 percent more likely to bear a low birth weight baby.
- Infants of unmarried mothers are almost twice as likely to die as infants of married mothers.
- Over 75 percent of births to unmarried mothers are unintended.
- Pregnancies of unmarried women are much more likely to end in abortion than pregnancies of married women.
- Over one-quarter of pregnancies to unmarried women in 2000 ended in abortion.

The goal of the data contained in this report is to serve as a cornerstone to increase capacity building for looking at unwed pregnancy across the state. Additional copies may be obtained by contacting the health department at (334) 206-5675.

Annual hospital breastfeeding survey results announced

The goal of the annual Alabama Breastfeeding Data Hospital Survey is to provide a consistent statewide mechanism for reporting breastfeeding data between public and private health.

Michell Grainger, MSN, RNC, IBCLC, state lactation coordinator with the Division of WIC, stated, "The Healthy People 2010 goals for breastfeeding are that 75 percent of mothers will initiate breastfeeding, 50 percent will breastfeed for at least six months, and 25 percent will continue to breastfeed for one year. These goals can only be achieved by supporting breastfeeding in the community, clinic, workplace and health care setting. The data collected from this survey can help determine where assessment, intervention and follow-up care are needed."

The 2002 Alabama Breastfeeding Data Hospital Survey, based on data collected for the year 2001, was distributed to every Alabama hospital providing obstetrical services. Of the 64 surveys mailed, 72 percent returned the survey.

Of the 68 percent of hospitals currently tracking the number of breastfeeding mothers and infants, results found that slightly less than half of breastfeeding mothers

supplemented with formula during the hospital stay.

Other results are as follows:

- 77 percent of hospitals provide lactation services/support
- 64 percent of hospitals provide follow-up counseling to breastfeeding mothers after discharge
- 84 percent of hospitals offer prenatal breastfeeding classes
- 20 percent of hospitals offer postpartum breastfeeding classes
- 80 percent of hospitals give breastfeeding mothers gift packs with formula
- 70 percent of hospitals provide staff with breastfeeding training
- 74 percent of breastfeeding mothers receive a manual breastpump in the hospital

WIC and hospitals are working to promote breastfeeding as the optimal source of nutrition for all Alabama babies. Ms. Grainger said, "It is important that the WIC program and Alabama hospitals work together to incorporate strategies that will improve the breastfeeding initiation and duration rates."

For additional information you may contact Ms. Grainger at (334) 206-5673.

Discuss dental sealants with your child's dentist

Protective dental sealants can prevent much of the tooth decay that children experience. Dental organizations in Alabama recommend that parents discuss sealants with their children's dentists. The most recent dental survey of Alabama school children, conducted in 1990-91, found that 39 percent had one or more cavities.

Dental sealants are thin plastic coatings that are applied to the chewing surfaces of the molars (back teeth). Most tooth decay in children and teens occurs in these surfaces. Sealants cover the chewing surfaces to prevent decay.

While brushing and flossing help remove food particles and plaque from smooth surfaces of teeth, toothbrush bristles cannot reach all the way into the depressions and grooves. Sealants protect these vulnerable areas.

Permanent molars are the most likely to benefit from sealant application. First molars usually come into the mouth when a child is about 6 years of age. Second molars appear at about age 12. It is best if the sealant is applied soon after the molars have erupted, before the teeth have a chance to decay. For that reason, children between the ages of 5 and 15 benefit most from sealants.

Applying sealants does not require drilling or removing tooth structure. It is an easy, three-step process: A dentist or

dental hygienist cleans the tooth with a special toothpaste. A special cleansing liquid is rubbed gently on the tooth and is washed off. Finally, the sealant is painted on the tooth. It takes about a minute for the sealant to form a protective shield.

Dr. Stuart Lockwood, state dental director, Oral Health Branch, said, "Ask your dentist whether your child will benefit from the placement of dental sealants. Up to 90 percent of all tooth decay in school children is found on the part of the molar teeth that sealants can prevent."

Sealants recently have been estimated to be 60 percent effective in preventing decay on these teeth surfaces, according to the Centers for Disease and Prevention. Nationally, and statewide, about 25 percent of third graders were found to have sealants, but among low-income students nationally and in Alabama less than 3 percent of these children had a sealant.

Organizations endorsing the use of dental sealants include: Alabama Dental Association, Alabama Dental Society, Alabama Academy of Pediatric Dentistry, Alabama Academy of General Dentistry, University of Alabama School of Dentistry and Alabama Department of Public Health.

Retirees

The following employees retired from the department effective March 1:

Doris Hohnstein - Health Care Facilities

Earl Herrmann - Food, Milk and Lodging

Judy Miller - Clay County Health Department

Commendations

Health department employees who are listed here have received letters of commendation recently. To recognize other employees, please send letters through your supervisors or the state health officer to *Alabama's Health*.

Regina Mitchell

Russell County Health Department

from Kathy Coulter
Phenix City, Ala.

Susan Reed

Health Provider Standards

from Michele Williams
Montgomery, Ala.



Environmentalists attending Alabama Environmental Health Association chapter meetings receive training in the use of GPS (global positioning systems) retrieval. State Public Health Veteranarian Dr. Bill Johnston (shown here) demonstrates a handheld GPS like those purchased for every county and area environmental director. This handheld device will help in locating mosquito pools, West Nile virus cases, rabid animals and septic tanks and providing documentation of illegal dumps. GPS is a worldwide navigational system that can be customized to meet needs and preferences.

Is your home fire safe?

For a number of years, Alabama has ranked among the top 10 nationally for fire-related deaths and injuries. Of those most at risk are children ages 5 and under and adults ages 65 and older. Many home fires can be prevented by practicing the following fire safety rules.

Working Smoke Alarms: A working smoke alarm can reduce home fire deaths by as much as 50 percent.

- ✓ One alarm is needed per level of home.
- ✓ Place alarms in hallways and areas just outside the family sleeping area.
- ✓ Check alarms at least two times per year.

Cooking: One of the most common causes of residential fires is cooking.

- ✓ Always wear fitted clothing.
- ✓ Never leave stoves unattended.
- ✓ Keep children away from cooking areas.

Smoking: Smoking in the home is the leading cause of fire deaths.

- ✓ Never smoke in bed.
- ✓ Never leave lit cigarettes unattended.
- ✓ Keep lighters and matches away from children.

Heating: Home fires are more likely to occur during the winter months.

- ✓ Do not leave fireplaces unattended.
- ✓ Keep space heaters at least three feet from a flammable source.
- ✓ Clean wood stoves and fireplaces yearly.

Evacuation Planning: Only 16 percent of American families have a home fire escape plan.

- ✓ Plans should include two escape routes from every room.
- ✓ Families need to designate an outside meeting place.
- ✓ Practice your home escape plan at least two times per year.

Free fire safety conference

The Injury Prevention Division of the Alabama Department of Public Health would like to extend an invitation to you to participate in a BIC play safe! be safe! Fire Safety Conference. This FREE conference will be held Tuesday, June 17, 2003, from 9 a.m. until noon at the Montgomery Civic Center. This train-the-trainer program is designed to give preschool and kindergarten teachers, daycare providers, public health care professionals, social workers and fire safety educators

the tools needed to effectively teach fire safety to young children ages 3 through 5. Nationally, fire is a leading cause of unintentional injury deaths among children ages 0 to 5.

Topics for the conference include children's capacity to understand fire, teaching children life safety skills, and involving families in fire safety. All workshop participants

Safety conference.....continued on page 7

Safety conference.....continued from page 6

will receive one FREE play safe! be safe! kit that includes a 20-minute video, flash cards, and a teacher's manual. The deadline to register is Monday, May 5, 2003. Applicants must pre-register to receive a kit. Pending application approval, continuing education units (CEU) will be available. Please share information about this workshop with interested groups in your area.

To learn more about the conference, contact Amanda Calhoun at 1-800-252-1818 or visit our Web site at www.adph.org/injuryprevention.



Injury News

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Carol F. Mysinger, M.Ed., M.P.A.....Director

Amanda E. Calhoun, M.S.P.H.....Editor

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Safety Division, Alabama Department of Economic
and Community Affairs

Newspaper features Russell County Health Department

The "Health Report" for the *Phenix Citizen* included an excellent article describing public health services for the Phenix City area in its Jan. 30 issue. Marcy Gilder, clinical supervisor for the Russell County Health Department, and Maribeth Johnson, R.N., were interviewed and Ms. Johnson was pictured with the article.

Readers were provided a description of the wide scope of services for the public—family planning, immunization resources, WIC, Plan First, HIV, STD, TB and cancer, environmental health, food establishment inspection, solid waste disposal, septic tank guidelines, medical social services, skilled nursing care, personal care and ALL Kids.

Lotus Word Pro Tip

The Computer Systems Center would like to educate employees about the Lotus Smart Suite and plans to offer convenient training in the near future. Tracey Cannon has provided the following helpful tip for users.

Repeated labels

To produce a sheet of labels containing the same information, type the information in the first label. With the mouse, right click on the completed label. From the pop-up menu that appears, go to "Select" then to "Cell Contents" The text in the label should be highlighted.

Right click on the completed label again and choose "Copy." Highlight the blank labels, right click again and choose "Paste." A dialog box may pop up which says "Pasting may overwrite data in your document with data on the clipboard. Are you sure you want to continue. Press F1 for more information. Click the "Yes" button. Your information should be copied to the remaining labels.

Announcing the Alabama Public Health Hero Award Call for Nominations

He courageously calls attention to the health plights of our fellow citizens.

She works to develop programs in our communities to prevent disease, promote health, and improve access to needed health care services.

He strives daily to make certain that our water is drinkable, that our air is clean, that our roads are safe, and that our food is fresh.

She answers "Why Not?" when told some project or program or idea simply won't work.

Who are Alabama's Public Health Heroes?

Our state is replete with people working in health departments, public and private clinics, city, county, and state governments, schools, businesses, industry, and as volunteers to improve the health and quality of life for the citizens of Alabama.

The UAB School of Public Health wants to honor one of these dedicated and often unsung people as Alabama's

Public Health Hero 2003.

Through the generosity of the Hillcrest Foundation, the UAB School of Public Health will honor this year's Public Health Hero with \$1,000 in recognition of her or his public health achievements. The award for 2003 will be presented at the School's Annual Honors Convocation at the Birmingham Museum of Art on May 9, 2003.

Take a moment to think about all the people you know who work daily to improve the health and well being of Alabama's citizens.

Now, nominate your candidate for the Public Health Hero Award for 2003 by completing the nomination form on page 9 and returning it by **Monday, April 14, 2003**.

If you have any questions, please call Max Michael, MD at 205-975-7742 or via email at maxm@uab.edu.

SPEAKING OF RETIREMENT Employees' Retirement System Retirement Preparation Seminars

Most people would agree that it takes a lot of preparation and planning to have a successful once-in-a-lifetime vacation. Yet many of these same people who do detailed work on their vacation planning do not practice the same measures when it comes to their retirement. So many Alabamians let their retirement just "slip up on them" without having done the proper planning.

Numerous reasons exist why people do not begin planning for their retirement, but one of the main reasons is procrastination. For anyone to have a successful and happy retirement, planning should begin as early as possible. There is no place for procrastination when a retirement is at stake.

The Retirement Systems of Alabama believes that it has a duty to help ERS members gain as much information as possible to assist them in planning for a successful retirement. In September 2002, the RSA launched a new program across the state called **RET PREP SEMINARS**. RET PREP SEMINARS are full-day educational

retirement planning seminars for members who are at least within two years of retirement eligibility. (On a 25-year retirement plan, this means that members who have at least 23 years of service or who are at least 58 years old with at least 8 years of service are eligible to attend. On a 30-year retirement plan, you must have at least 28 years of service.) Presentations on Social Security; health insurance; long term care; retirement adjustments; the TRS retirement process and options; and DROP are featured on the agenda.

So, how do you go about getting registered for a RET PREP SEMINAR? See your Human Resources Office or Personnel Office for a schedule and a registration form. You may also visit the RSA Web site and look for Retirement Planning, Education and Counseling Services link. The newly released schedule and the registration form are available for you to download.

Seminars fill quickly so you are urged to act promptly. Registration is mandatory for seminar participation. Since *Retirement.....continued on page 11*

Alabama Public Health Hero for 2003 Nomination Form

I. Name _____

Address _____

Street

Office Phone _____

City

Zip

Home Phone _____

II. Describe nominee's occupation or volunteer role:

III. Describe how nominee works to improve the health of Alabama's citizens through efforts that address communities at large. Communities can be defined in many ways, by geopolitical boundaries (state, county, city), by risk group (infants at risk for sickness and death because of premature birth and/or birth defects; individuals at risk of diseases such as cancer, heart disease, stroke, dementia, depression and other forms of mental illness, etc.), or by educational, financial and insurance status that limit access to care.

(You may attach additional sheets to answer this.)

IV. Letter(s) of support (optional)

Please return completed form including letters of support by Monday, April 14, 2003, to:

Max Michael, MD
Dean
UAB School of Public Health
RPHB 140, 1530 Third Avenue South
Birmingham, Ala. 35294-0022

If you have questions about this nomination form, you may call Dr. Michael at 205-975-7742 or email him at maxm@uab.edu.

Wellness screening helps Decatur employee learn about and deal with her diabetes

This letter was sent in appreciation of the screening program conducted by the Worksite Wellness Program.

Ms. Martha Camp,

I talked with you Saturday at Wallace State College regarding my diabetic screening last July.

I am an instructor at Wallace State and have had a history of low blood sugar for many years. Last summer, I contracted social services with Cullman County Department of Human Resources. The last week of July 2002, your department conducted a wellness screening for state employees. I participated in the screening and my results were normal with one exception. My glucose reading was high. I was shocked as I had a "weak spell" that morning in the field and had to eat. I thought my glucose was low. I cried when the nurse told me it was high and she was worried. Your office referred me to my family physician in Decatur. I made an appointment for two days later and he looked at the results of your screening test and then ordered a glucose tolerance test. The results were positive for Type II diabetes. Dr. Reddy then sent me to nutritional counseling at Decatur General Hospital. I was placed on a low carbohydrate diet and an exercise program.

Thus far, I have been able to control the diabetes with diet and exercise.

Both of my grandmothers died of diabetic complications. That was my only risk factor. Dr. Reddy believes my problem is genetic as my cholesterol, weight, body fat, and other blood work was in the normal range for someone 39 years old.

If it were not for your office, I would be walking around not knowing I have diabetes. Last summer, I did notice my skin was very dry, my urine was discolored and had an odor, and I was very fatigued. I told my brother the week before I was diagnosed I was mentally and physically exhausted and thought I'd reached the breaking point. I am a trained clinical psychologist and a licensed social worker and knew I was not clinically depressed. I just thought I was working too hard.

Thank you so much. Your office may have saved my life. I had the symptoms and just didn't realize until your screening. Please continue your work to screen for potential health problems. As a state employee, I realize you are overworked and underpaid, but prevention is cheaper than treatment.

Thanks again for possibly saving my life,

Susan Beck

Study finds racial differences in mortality

Alabamians of black and other races have higher death rates and a lower life expectancy than whites, a study by the department for the years 1998 through 2000 found.

For both racial groups studied, the three leading causes of death were heart disease, cancer and stroke. After the top three causes, the leading causes differed by race. Accidents and diabetes ranked as the fourth and fifth leading causes of death for black and other race Alabamians. For white Alabamians, respiratory diseases and accidents ranked fourth and fifth.

Alabamians of black and other races have a life expectancy at birth of 72 years compared to 75 years for whites. Alabamians of black and other races die at younger ages for nearly all of the important causes of death studied. However, white Alabamians are at a noticeably higher risk for mortality from accidents, suicide and lung-associated diseases such as lung cancer.

The Center for Health Statistics released these findings in the Alabama Atlas of Racial Disparities in Mortality, a geographical study of racial disparities in the state. According to Kathryn Chapman who authored the study, the multi-colored county maps demonstrate the disparities among counties and between racial groups. Eliminating disparities in health outcomes is a serious public health concern in Alabama.

Gwen Lipscomb, director of Minority Health, said "It is a concern which should involve state agencies, medical facilities, health centers, schools of public health, health departments, faith organizations and communities. The challenge for us is how we collectively develop and implement strategies to reduce and eliminate the disparities. This atlas is a useful resource to make communities aware of their overall health so they can implement appropriate prevention activities."

The risk of dying from certain causes can be modified by lifestyle changes. Cigarette smoking is the most important risk factor for respiratory diseases. Three of the risk factors for diabetes are physical inactivity, being overweight and having high blood pressure. Motor vehicle fatalities are a major component of accidental deaths. Wearing safety belts lessens the risk of dying in a motor vehicle accident.

"The fact is, wearing a seat belt and placing children in an appropriate car seat really does save lives," said Nancy Wright, director of the Injury Education Branch. "Everyone should buckle up."

Copies of this publication can be obtained from the Center for Health Statistics, P.O. Box 5625, Montgomery, Ala. 36103-5625, (334) 206-5429. The atlas is also available at www.adph.org under Fast Find/Health Statistics.

Alabamians fail to recognize folic acid's effect on reducing birth defects and infant mortality

Awareness of folic acid has gone down instead of up in Alabama, according to a recently released March of Dimes Gallup Poll. Folic acid is a B vitamin found in most over-the-counter multivitamins that has been shown to reduce the occurrence of birth defects of the brain and spine if taken before and during pregnancy. According to the survey, awareness of folic acid among all Alabamians fell from 65 percent in 2001 to 57 percent in 2002.

The Alabama Folic Acid Council held a "State of the Campaign" news conference at the Alabama State House in Montgomery. First Lady Patsy Riley has been named Honorary Chairwoman of the Alabama Folic Acid Council, and will speak out about folic acid deficiency in Alabama women's diets. This deficiency contributes to the state's high infant mortality rate, which ranks Alabama 49th in the nation.

According to the survey, only one-fourth of women of childbearing age take a folic acid supplement daily that might help prevent these often life-threatening and debilitating birth defects. Among these women, awareness has dropped 10 percentage points to 65 percent since 2000.

"Something as simple as taking a multivitamin everyday and maintaining a healthy diet and optimal weight can greatly improve a woman's chances of having a healthy baby," said Dr. Tom Miller, Director of the Bureau of Family Health Services and member of the Alabama Folic Acid Council. "Birth defects are the number one cause of infant mortality. If you reduce the occurrence of these most fatal types of birth defects, you can have an impact on the infant mortality rate."

In 1992, the U.S. Public Health Service issued guidelines recommending that all women of childbearing age to consume at least 400 micrograms of folic acid daily as part of a healthy diet to improve their chances of having a healthy baby. To address this problem, a number of organizations with a common interest in reducing birth defects formed the National Council on Folic Acid in 1997, under the leadership of the March of Dimes and the Centers for Disease Control and Prevention (CDC). In 1999, the Alabama Chapter of the March of Dimes followed suit and partnered with 25 other organizations throughout the state to form the Alabama Folic Acid Council.

"As Alabamians, we must work together and intensify our efforts to deliver folic acid information to healthcare professionals and women, and motivate behavior change,"

Dr. Miller said.

Members of the Alabama Folic Acid Council are the March of Dimes Alabama Chapter, Alabama Peanut Producers Association, Alabama Farmer Federation Wives Club, Alabama Department of Public Health, Alabama State Nurses Association, Alabama Hospital Association, Alabama Medicaid Agency, Alabama Pharmacy Association, Alabama Academy of Family Physicians, Alabama Dietetics Association, American Academy of Pediatrics, Medical Association of Alabama, Gift of Life Foundation, University of Alabama at Birmingham, Auburn University, University of South Alabama, Mobile Infirmary Medical Center, Spina Bifida Association, Alabama Department of Mental Health/Mental Retardation, Alabama Department of Agriculture & Industries, Association of Women's Health - Obstetrics & Neonatal Nurses, Alabama Section - American College of Obstetricians & Gynecologists, Civitan International Research Center Department of Education, Alabama Department of Education, and the Alabama Department of Rehabilitation Services.

Retirement.....continued from page 8

retirement affects not just the member but also the spouse, spouses may be registered to attend as well.

* Please look for the Retirement Checklist on the RSA Web site. The checklist can serve as a guide for your last 12 months before your retirement date.

If you have questions concerning the **Ret Prep Seminars**, you may call the Communications Department at the RSA: (334) 832-4140 or (800) 214-2158 - press 9 then 3.

Prepared by the Communications staff of the Retirement Systems of Alabama. To have your questions answered in "Speaking of Retirement", please address them to Mike Pegues, Communications, Retirement Systems of Alabama, 135 South Union St., P. O. Box 302150, Montgomery, Ala. 36130-2150.



March is National Nutrition Month and National Social Work Month.

Calendar of Events



March 19

Understanding Alzheimer's Disease, Home Health Aide and Home Attendant Continuing Education, 2-4 p.m. For more information contact Janice McIntosh, (334) 347-2664, extension 400.



April 3

ADPH Statewide Staff Meeting, 3-4 p.m. For more information contact Jim McVay, Dr.P.A., (334) 206-5600.



April 9

Serving HIV Infected Clients in Women's Health, Public Health Staff Development, 2-4 p.m. For more information contact Annie Vosel, (334) 206-2959.



April 23

Bioterrorism in America Today, UAB Grand Rounds, 12 noon -1:30 p.m. For more information contact Mike Maetz, (205) 934-7074.



April 24

Alabama Public Health Association. For more information contact Jim McVay, (334) 206-5600.

April 24-25

Alabama Public Health Association, Mobile Convention Center. For more information contact Tony Thompson, (251) 479-8379.



May 8

Doing More for With Less - Anne Smith Seminar, 1-3 p.m., RSAActivity Center. For more information contact Debbie Thomasson, (334) 206-5648.



May 14

Caring for Cancer Patients in the Home, Home Health Aide and Home Attendant Continuing Education, 2-4 p.m. For more information contact Janice McIntosh, (334) 347-2664, extension 400.



June 11

Documentation Standards and Legal Issues in Women's Health, Public Health Staff Development, 2-4 p.m. For more information contact Annie Vosel, (334) 206-2959.



July 9

OSHA Infection Control Update, Public Health Staff Development, 2-4 p.m. For more information contact Debbie Thomasson, (334) 206-5648.



July 10

ADPH Statewide Staff Meeting, 3-4 p.m. For more information contact Jim McVay, Dr.P.A., (334) 206-5600.

